



FEMA

**MINUTES OF THE
FEDERAL INTERAGENCY COMMITTEE ON
EMERGENCY MEDICAL SERVICES (FICEMS)
Ambulance Safety Subcommittee**

DATE & TIME:	June 2, 2005 1:00 p.m.
LOCATION:	HHS, HRSA Parklawn Building, 3 rd floor conference room Rockville, MD
MEMBER AGENCY REPRESENTATION:	Department of Homeland Security <i>Federal Emergency Management Agency (FEMA)</i> Ms. Cathy Broughton United States Fire Administration
	Department of Agriculture No Representation
	Department of Commerce (DOC) Jeannette Young Reese National Technical Information Service (NTIS) Wayne Strickland National Technical Information Service (NTIS)
	Department of Defense (DOD) No Representation
	Department of Interior Mr. Dan Pontbriand National Park Service

	Department of Justice (DOJ) No Representation
	Department of Labor No Representation
	Department of Transportation (DOT) Mr. Drew Dawson National Highway Traffic Safety Administration (NHTSA) Mr. Dave Bryson, NHTSA Ms. Susan McHenry, NHTSA Ms. Kelly McGuire, NHTSA Mr. Greg Mango, NHTSA Mr. Robert Squire, NHTSA Mr. Kenny Oland, NHTSA Mr. Mike Parson, NHTSA
	Department of Veteran Affairs No Representation
	Federal Bureau of Investigation (FBI) No Representation
	Federal Communications Commission No Representation
	General Services Administration (GSA) Mr. John McDonald
OTHER ATTENDEES PRIVATE SECTOR:	American Ambulance Association Mr. Kurt Krumperman*
	American Integrated Training Systems Mr. Billy Rutherford
	American Medical Response Mr. Ron Thackery

	American Society Testing and Materials Mr. Pete Chambers
	Centronia Ambulance Corps Mr. Larry Wiersch*
	Emergency Responder Safety Institute Mr. James Garcia*
	Estero Fire and Rescue Department Dr. Jeff Lindsey*
	UCLA Medical Ann McNeil* Lynn Coates*
	Maryland Institute for Emergency Medical Services System Ms. Rene Fechter
	Harlem Hospital Ms. Nadine Levick*

**Dial-in Participants*

I. ANNOUNCEMENTS & INTRODUCTIONS

Ms. Nancy Romano called the meeting to order at 1:00 p.m. and proceeded with introductions.

II. REVIEW OF PAST MEETING MINUTES & ACTION ITEMS

Ms. Romano made a motion to approve the minutes from the March 2005 meeting, the motion was second and the minutes were approved.

Ms. Romano reviewed the status of the action items generated from the March meeting. Actions (A) and Status (S) is listed below from the previous meetings action items:

A: Ms. Romano asked Mr. Thackery about the possibility of bringing the AMR Ambulance Prototype to the June meeting. (AI)

S: Complete. The AMR Prototype Ambulance was on-site at the meeting.

A: Mr. Bryson wants to have a teleconference to continue discussions regarding the National Ambulance Safety Meeting (AI).

S: Closed. It was decided that the issues could be accomplished through email and that a teleconference may need to occur closer to the time of the meeting.

A: Mr. Rutherford to send Mr. Garcia a copy of the National Standards Curriculum materials.

S: NATEK will follow-up with Mr. Rutherford and Mr. Garcia to find out the status of this action item.

A: Mr. Rutherford to work with Mr. Krumpferman to provide an outline of the pros and cons of simulation to Ms. Romano (AI). In addition, a teleconference will be coordinated in June (AI).

S: Partially completed. Mr. Rutherford presented the initial findings of the pros and cons of ambulance driver simulation training. A teleconference is to be scheduled for June to present more detailed findings.

III. NEW BUSINESS

Ms. Nadine Levick announced a webinar would be held on June 14th to discuss the

Mr. Dave Bryson, NHTSA, provided an update on the progress in planning for the upcoming National Ambulance Safety meeting. The date has not yet been defined, but will probably occur in late summer or early fall. Progress has been delayed as NHTSA is awaiting the award of the contract for the conference coordinator. Instead of attempting to coordinate a teleconference to discuss details of the proposed agenda and attendees, Mr. Bryson and Ms. Romano agreed that these issues could be best resolved via email at this time. Mr. Bryson provided a proposed list of attendees that included the participants of the FICEMS AS subcommittee.

Mr. Bryson introduced two new members of the NHTSA organization that will become regular participants in the AS. The Office of Safety Recall was represented by Mr. Greg Mango and Mr. Bob Squire and the Special Crash Investigations Office was represented by Mr. Mike Parsons and Mr. Kenny Oland.

Mr. Rutherford, AITS, provided a presentation on the pros and cons of the use of simulation tools for driver training. While an effective means of training, a limiting element is the variance in the different types of ambulance platforms. Mr. Rutherford offered to conduct a more detailed discussion in a teleconference format if the group was interested. The group agreed that this would be a worthwhile discussion and would like to move forward with the teleconference sometime in June. Mr. Rutherford took the action to coordinate with Ms. Romano to determine the date and logistics.

Mr. Paul Moore, NIOSH, indicated that the NIOSH Ambulance Worker Safety study has been delayed due to some legal issues and would be ready by the fall of 2005. Mr. Moore shared some compelling video of both frontal and side crash test results that were conducted as part of the study. He suggested that time be set aside at the September meeting to present the preliminary results of the study.

Mr. Moore indicated that the Phase II testing will focus on restraint systems.

Mr. Thackery provided an overview of the AMR prototype ambulance that was available on-site. Mr. Thackery pointed out some of the newer features including the collision avoidance warning system, the black box onboard computer system, the seatbelt warning system and

the vehicle mobile network gateway provides routing and mapping along with GPS capability.

With no further reports, Ms. Romano adjourned the meeting.

IV. NEXT MEETING AGENDA ITEMS

NIOSH to report the initial findings of their Ambulance Worker Safety study **(AI)**.

If the National Ambulance Safety Meeting occurs prior to the September meeting, a report of the results of that meeting should be provided.

V. NEW and/or ONGOING ACTION ITEMS

1. Mr. Rutherford to coordinate a teleconference to present the detailed results of the simulation training pros and cons **(AI)**.
2. Ms. Romano will set-up a teleconference for Nadine Levick's presentation information that she provided on the webinar **(AI)**.

VI. NEXT MEETING

September 2, 2005, 1:00 p.m.
Tentative: NHTSA Bldg, Washington, DC

VII. ADJOURNMENT

Meeting adjourned at 2:00 p.m.

Introducing the Safest Ambulance on the Streets

AMR's next generation ambulance makes medical transportation safer for both medics and patients, enabling full access to the patient for uncompromised care and treatment.

- ePCR - Clinical Information Reporting System - application to record the patient interaction
- Nomad - This electronic vehicle status messaging system tracks and records the vehicle's status and availability

- Marvli - Vehicle routing and mapping system
- InMotion - In vehicle mobile network gateway and GPS tracking
- Road Safety - Seat Belt monitoring, video interface, accident avoidance and vehicle dynamics reporting system

Seatbelt warning system monitors all seating positions.

High output Heat/AC system accommodates variable filtration capabilities, includes HVAC ducted through patient compartment headliner.

A collision avoidance warning system uses radar sensors to locate vehicles ahead of the ambulance and at intersections, and reads vehicle speed to warn of collision potential.

Special lighting package includes amber LED caution lights that flash at motorist eye level, as well as LED emergency warning lights.

A "black box" on-board computer system records driver performance and audibly warns of driver activity that is outside established safety parameters.



Dual patient compartment switch panels allow the crew to control the compartment's heat/AC and lights from either rear seat position.

Advanced video patient/customer monitoring system for the patient compartment records compliance with safety procedures.

Specialized dual crew seating allows medics to use seat belts without compromising patient access.

Specialized ergonomic storage holds disposable gloves and cardiac monitor system.

Four point aviation style shoulder harness makes medical crew seating safer.



Improved padding on interior surfaces protects against impact.

Reconfigured interior cabinetry reduces impact risk and increases storage ergonomics.